

**LOOMIS UNION SCHOOL DISTRICT  
Application for Use of Facilities**

Date confirmed with site \_\_\_\_\_  
Confirmed by: \_\_\_\_\_

1. \_\_\_\_\_  
Name of Requesting Organization \_\_\_\_\_ Date(s) of Use \_\_\_\_\_ Time of Use (from-to) \_\_\_\_\_

2. Facilities Requested: \_\_\_\_\_ Specify District Site: \_\_\_\_\_  
Ball Field/Playground [ ] Library [ ] Kitchen Facilities [ ] Classroom [ ] (Rm. #\_\_\_\_)  
Amphitheater/Stage [ ] Hardcourt [ ] Computer Lab [ ] Multipurpose [ ]  
Gymnasium [ ] Other (Please specify) \_\_\_\_\_

3. How will facilities be used? \_\_\_\_\_  
Is attendance restricted? \_\_\_\_\_ If YES, explain: \_\_\_\_\_  
Admission charged? \_\_\_\_\_ If YES, how much? \_\_\_\_\_ Number in attendance \_\_\_\_\_  
Special Arrangements: \_\_\_\_\_

4. **STATEMENT OF APPLICANT:** The undersigned applicant is an authorized official of the group submitting this application. The applicant has read the District's rules and regulations including Board Policy 1330. In accordance with current law, it shall be distinctly understood, and agreed, that subject applicant and related organization making this application assume **ALL RISK FOR LOSS, DAMAGE, LIABILITY, INJURY, COST or EXPENSE** that may arise during or be caused in any way by such use of occupancy of the facility. Applicant waives all claims against the District, its Board, employees and agents for injury, accident, illness, death or property damage arising out of the use or occupation of the facility. Facility user (Lessee) is required to comply with the lawful requirements of the District, the State of California, and all applicable requirements of the Town of Loomis and Placer County regarding discharges to the storm drain system and watercourses, including applicable requirements specified in local municipal storm water management programs or plans.

The applicant further agrees that in consideration of being permitted to use said facilities, the applicant and/or organization will Save and hold said Loomis union School District and their agents and employees free and harmless from any loss, claim, liability, damages and/or injuries to persons and property that in any way may arise out of the applicant's use or occupancy of said facilities. It is also required that the applicant provide a Certificate of Liability Insurance as well as a separate endorsement naming the Loomis Union School District as an additional insured.

I declare under penalty of perjury that the foregoing is true and correct.

Signed: \_\_\_\_\_  
Print Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Liability Insurance Carrier: \_\_\_\_\_ Policy Number: \_\_\_\_\_  
Additional insured endorsement attached: YES\_\_\_\_\_ NO\_\_\_\_\_, if no, request

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**APPLICATION STATUS**

Permission for use of the facilities is: \_\_\_\_\_ APPROVED \_\_\_\_\_ DENIED If denied, reason: \_\_\_\_\_

Free [ ] Direct [ ] FMV [ ] The following \*fees are payable in **ADVANCE** to the **Loomis Union School District**:  
Rental Fee \$ \_\_\_\_\_ Equipment Fee \$ \_\_\_\_\_ Utilities Fee \$ \_\_\_\_\_  
Personnel Fee \$ \_\_\_\_\_ ( \_\_\_\_\_ hours @ \$ \_\_\_\_\_ per hour) **TOTAL FEE \$ \_\_\_\_\_**

Signed: \_\_\_\_\_ Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_ **\*See attached fee schedule**